



*The Commonwealth of Massachusetts
Commonwealth Health Insurance Connector Authority
100 City Hall Plaza, 6th floor
Boston, MA 02108*

CHARLES D. BAKER
Governor

KARYN POLITO
Lieutenant Governor

MARYLOU SUDDERS
Board Chair

LOUIS GUTIERREZ
Executive Director

Board of the Commonwealth Health Insurance Connector Authority

Minutes

Thursday, February 12, 2015
9:00 AM to 12:00 PM

One Ashburton Place
Boston, MA 02108
21st Floor Conference Room

Attendees: Louis Gutierrez, Marylou Sudders, Nancy Turnbull, Dolores Mitchell, Celia Weislo, Jonathan Gruber, George Gonser, Rick Jakious and Gary Anderson. John Bertko and Louis Malzone joined by phone due to geographic distance. Lauren Peters attended in place of Kristin Lepore.

The meeting was called to order at 9:09 AM.

- I. Minutes:** The minutes of the January 15, 2015 meeting were approved by all Board members except for Secretary Sudders who abstained as she was not present at the previous Board meeting.

Secretary Sudders noted that she was employing designee language outlined in statute that allows her to sit in as Board Chair in place of Secretary Lepore who would be sitting in as designee for Daniel Tsai. She explained that this was meant to show the Governor's commitment to having both health care and finance equally represented on the Health Connector (CCA) Board. Secretary Sudders communicated that Secretary Lepore sent greeting and regrets on not being able to be present at the Board meeting as she had a budget meeting with the Governor. She welcomed Louis Gutierrez and expressed confidence in his and Daniel Tsai's future collaboration to ensure affordable health insurance and sustainable programs at CCA and MassHealth. Ms. Turnbull welcomed Secretary

Sudders and asked Secretary Sudders to confirm that as Board Chair designee she will also have full authority to perform Board Chair duties. Secretary Sudders confirmed this.

- II. Executive Director's Report:** Mr. Gutierrez noted that he looks forward to working with the Board to continue the mission of providing accessible health care to Massachusetts residents. He stated that it has been a busy time of year at CCA and an exciting time to join the team, in CCA and in the Baker administration. He noted that the previous Friday, CCA celebrated the 100,000th person enrolled in a Qualified Health Plan (QHP), a milestone a long time coming and stated his thanks to CCA staff for their hard work to make this happen. Mr. Gutierrez reported that as of February 11, 102,169 individuals were enrolled in non-group medical plans and 22,769 individuals were enrolled in non-group dental plans. Of note, over 329,000 individuals had been enrolled in CCA or MassHealth coverage since open enrollment. He thanked Maydad Cohen for his leadership and dedication to the project as this was his last CCA Board Meeting. Mr. Gutierrez noted that Mr. Cohen had been instrumental in standing up the technology platform and operations during open enrollment.

Mr. Gutierrez continued, stating that there was still work to be done in completing open enrollment and that extended hours and outreach would be discussed during this meeting. He communicated the commitment by CCA to continue to sign people up, including helping people one at a time to complete applications would continue. He stated that the team will work together to make the next chapter in the CCA story and that the Baker administration is positioned to continue the momentum. He stated that he looks forward to working with Executive Office of Health and Human Services (EHS) and MassHealth as the Commonwealth continues to provide access to affordable coverage options. He also noted that he looks forward to meeting with individual Board members as well as key stakeholders in the public.

Secretary Sudders, at the request of a Board member, reordered the agenda.

- III. Open Enrollment and System Update:** The PowerPoint presentation "Open Enrollment and System Update" was presented by Maydad Cohen. Mr. Cohen began the presentation by providing a summary of the progress that the team has made in the last year to implement the new Massachusetts system and get individuals enrolled into the proper coverage. He provided an overview of system stability, including information on eligibility determinations, unique website visits and concurrent user volume. Mr. Cohen also reported on enrollment gains in MassHealth and CCA as well as call center performance. He noted that with regards to call center performance, Optum serves as an "extra" center so their statistics look different than the MassHealth and CCA call centers as they intake the initial volume and then rout calls to Optum as needed. Mr. Cohen then reported on extended hours for the CCA call center for the remainder of open enrollment. Ms. Mitchell asked whether Massachusetts would provide leeway for individuals who may incur a penalty for not enrolling in health insurance coverage per statements made by Secretary Burwell. Mr. Cohen stated that in Massachusetts it is not believed that this will be an issue requiring such flexibility. Ms. Wcislo asked how MassHealth redeterminations would impact the CCA call center. Mr. Gutierrez stated that the letters

sent to individuals for redetermination will have a paper renewal form, mitigating the direct impact to CCA and the Maximus number would be provided in those communications, not the CCA number. He noted, however, that the CCA phone number was still listed on sections of the website and this could affect call volume. Mr. Cohen provided an update on the online payment system. He then provided a reminder to the Board of where the project started and the progress made since February 2014. He thanked the team for their hard work to get the project to this point.

Mr. Gutierrez then discussed next steps. He stated that the Commonwealth will continue efforts to expand access to affordable, quality healthcare to its residents. He noted that his background brings a focus on Information Technology (IT) and operations for the next open enrollment period and that there is a need to examine contracted services for effectiveness and efficiency. He vowed that, throughout, CCA would like to be known for transparency and accountability – all on his watch. He stated that he is working with Daniel Tsai at EHS to identify an individual who can assume some of Maydad's leadership role and stressed the importance of common governance continuing. Ms. Turnbull thanked Maydad and his team for their efforts. She noted that in particular, she was thankful for the work done to preserve coverage and keep Massachusetts off of the Federally Facilitated Marketplace (FFM) to preserve the ConnectorCare program. She also thanked Roni Mansur for his work on the project. Ms. Wcislo echoed her appreciation for overseeing the two programs and ensuring their success.

- IV. Proposed Affordability Schedule for Calendar Years 2015 & 2016 (VOTE):** The PowerPoint presentation "Proposed Affordability Schedule for Calendar Years 2015 & 2016 (VOTE)" was presented by Marissa Woltmann and Ashley Hague. Ms. Woltmann began the presentation by noting the focus of the presentation which is to provide background on the affordability schedule and explain the recommended approach for the 2015 and 2016 schedules. Ms. Woltmann provided an overview of the differences in the Massachusetts mandate and the federal mandate and the Health Connector's responsibility to provide affordability and coverage standards under state law. She then reminded the Board of the affordability schedule's practical application – to determine whether an individual must pay a penalty for not having Minimum Creditable Coverage (MCC) and that this was independent of other aspects of health care reform, though an important component. She noted that the affordability schedule is most relevant for a small portion of Massachusetts residents who do not have MCC and, therefore, face a penalty at the state level. Furthermore, she explained that individuals subject to both a state and federal penalty receive an offset from the Department of Revenue (DOR) to reduce the state penalty in the amount of the federal penalty. Ms. Woltmann explained that the affordability schedule needs to be set to the timeline of the ACA, which is why both 2015 and 2016 schedules were being recommended. Ms. Wcislo asked whether 2015 Federal Poverty Level (FPL) guidelines were being used. Ms. Woltmann confirmed and noted that this was a function of the ACA.

Ms. Woltmann reminded the Board of the 2014 affordability schedules to provide reference for the 2015 and 2016 proposals. For the 2015 proposal, Ms. Woltmann noted that, beginning in 2013, the Commonwealth has been transitioning the previous

affordability schedule to more closely align with the federal model. She explained that this was the third step in the three step process, where the affordability schedule would shift to a fully percentage based schedule rather than a fixed dollar schedule which allows for a steady increase in affordable premiums across a given income bracket. Ms. Woltmann then provided the recommendation for 2015 for individuals up to 300 percent of the FPL, between 300-400 percent of the FPL and for those above 400 percent of the FPL. Ms. Wcislo asked whether premiums and affordability were separate for ConnectorCare members. Ms. Woltmann explained that they were, however, it was a policy decision on how the two are aligned. Ms. Wcislo asked whether the proposed affordability for individuals below 300 percent FPL indicates whether they can afford coverage if they get coverage outside of CCA. Ms. Woltmann confirmed this.

Ms. Woltmann then reviewed the proposal for the 2016 affordability schedule. She explained that CCA proposes revisiting the methodology for individuals up to 300 percent of FPL by applying the highest percentage of income required for each income bracket that was used in the 2012 affordability schedule and apply that same percentage to the current FPL limits. She noted that percentages used for individuals will differ from those for couples and families. She then proposed increasing the affordability threshold to 7.4 percent and 7.6 percent, previously 7.2 percent and 7.4 percent, for individuals between 300 percent and 400 percent of FPL. Lastly, individuals above 400 percent of FPL will have an 8.3 percent affordability standard to align with the federal standard. Mr. Gruber asked which poverty line was being used. Ms. Woltmann answered that this assumes the 2015 figures published in January 2015. She further stated that because of the way in which the ACA functions, CCA has to use poverty levels in effect before open enrollment for 2016 plans for the 2016 affordability schedule.

In response to the increase of the federal standards, Ms. Turnbull asked Mr. Gruber to explain the federal indexing standards and the policy objective of federal indexing as individuals may have no change in income year to year but yet have to pay more in premium. Mr. Gruber explained that the tension is how to share the burden of rising health care costs between the government and the enrollee. He explained that, if the standard were kept at a constant, this assumes that any increase in the cost of health care is borne by the government. He provided an example, assuming that below 300 percent the rule would be to hold the same percent of income while health care costs double in the next ten years. These individuals would pay the same for something that is twice as expensive. He noted that the proposed CCA affordability schedule, in his opinion is well set up and that staff have done an incredible job providing a clear explanation for their proposal. Ms. Turnbull noted that she continues to be troubled by indexing because it hurts those with an unchanging income. Ms. Wcislo asked how the figures were determined for federal indexing. Mr. Gruber explained that it represents the excess of growth of health care growth over income growth; health care grew faster than income so federal affordability standards went up. He noted that this is an anomaly that Ms. Turnbull notes, because we think of affordability as a percentage of income. Mr. Gonser asked what happens after 2016 for the affordability schedule. Mr. Gruber noted that the Board has discussed this every year and that this is a decision for the Board Chair and Executive Director of whether this should be automated. Ms. Mitchell stressed that part

of the Board's responsibility is not to assume that the cost of health care legitimately should go up every single year and that there needs to be movement to keep health care less expensive and keep the standard from escalating. She noted that Massachusetts is one of the most expensive health care systems in the world, and that there is a need to address cost containment overall. The Board unanimously approved to issue for public comment the Draft Affordability Schedules for Individuals, Couples and Families for Calendar Year 2015 and 2016, as set forth in the staff proposal.

V. Update on Outreach and Communications for Fall 2014 Open Enrollment (VOTE):

The PowerPoint "Update on Outreach and Communications for Fall 2014 Open Enrollment (VOTE)" was presented by Ashley Hague, Rebekah Diamond, Jen Bullock and Whitney Rudin from MassHealth. Ms. Hague began the presentation by noting that the Commonwealth's multi-faceted outreach campaign proved successful. She noted that this was clear from website visits, program determinations and enrollments to date. Further, she stated that in response to outreach, 87 percent of the legacy QHP population took an action in the new system, along with 82 percent of the Commonwealth Care and Medical Security Program (MSP) populations and 51 percent of the temporary Medicaid population came to the system in some capacity. Mr. Gruber indicated interest in having a better understanding through data analysis of who comprises the new individuals getting into coverage. Ms. Diamond discussed the outreach campaign efforts and thanked the market and stakeholder community for their collaboration and support. Ms. Hague reviewed the transition data for the target populations showing no action, individuals in progress and those successfully enrolled.

Ms. Diamond discussed the last push for open enrollment, noting the continuation of robo calls and e-mails, paid and earned media as well as assistance available around the Commonwealth from Navigators and Certified Application Counselors (CACs). Ms. Rudin echoed the ability for individuals to receive assistance from CACs and that MassHealth was in the process of providing additional training to those organizations throughout open enrollment. Ms. Bullock stated that the CCA call center would support additional extended call hours and would be open on days when they would typically be closed during the end of open enrollment. She also noted that the Health Connector and MassHealth would be providing additional walk-in center support in advance of the deadlines. Ms. Bullock outlined the cost to increase the CCA call center hours and staffing and requested approval from the Board to enter into a work order extension with Dell amounting to \$623,341.29 to support these efforts. Ms. Turnbull asked whether this would help reduce call wait times and handle times. Ms. Bullock explained that CCA has been trying to ameliorate these issues in a number of ways. In response to a query from Mr. Gruber regarding availability of call backs, Ms. Bullock noted that there has been an option to provide call backs for individuals who would otherwise wait a long time. Ms. Hague added that, as CCA staff have seen from working one-on-one with consumers, applicants and members often have many questions during the process and CCA continually looking into ways to make the process more consumer friendly as a way to reduce call volume. Ms. Mitchell asked whether there were best practices that could be reviewed regarding the issues seen at the call center. Mr. Gutierrez stated that there were and that CCA will examine those. Mr. Gonser asked how Optum was being used for

operations. Mr. Gutierrez explained that Optum agents were handling application intake and payment calls and that there was a great deal of care being applied to protect against any conflict. Mr. Gonser asked whether this figure would factor into the contract with Optum. Mr. Gutierrez explained it would not as the Optum contract is managed by the Information Technology Division (ITD).

Ms. Hague stated that CCA would continue to outreach individuals after the open enrollment period, an effort that resembles the open enrollment campaign, but on a smaller scale. She outlined plans for both broad and more targeted campaigns. Secretary Sudders asked that CCA work to outreach minority communities, not only ethnic minorities but also individuals with disabilities and other populations that experience difficulty accessing coverage. Mr. Gutierrez stated his commitment to this effort. Mr. Gruber asked whether CCA was outreaching the unemployed. Ms. Diamond noted that CCA works closely with the Department of Unemployment Assistance (DUA) but that they would like to look into other ways to provide information about coverage options through the Commonwealth to the broader unemployed population.

The Board voted unanimously to authorize the Executive Director to enter into a work order extension with Dell Marketing, L.P., subject to agreement on terms, as recommended by staff.

The meeting was adjourned at 11:29 AM.

Respectfully submitted,
Rebekah D. Diamond